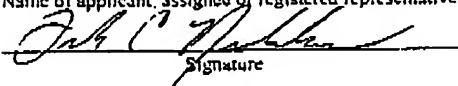


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FRANK C. NICHOLAS (33,983)
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Date of Signature

PATENT
Case No. GP-302957
(2750/30)

IN THE UNITED STATES PATENT AND TRADE MARK OFFICE

In re patent application of:

BRIAN A. WIMS, ET AL.

Serial No.: 10/601,467

Filed: JUNE 23, 2003

For: SYSTEM BENCH WIRELESS
MAPPING BOARD

Examiner: NGUYEN, TAN Q.

Group Art Unit: 2829

RESPONSE TO OFFICE ACTION DATED MAY 24, 2004

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22202-1450

Dear Sirs:

This is a response to an Office Action dated May 24, 2004. Please amend the above-
identified application as follows:

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CARDINAL LAW GROUP

1603 Orrington Avenue/Suite 2000
Evanston, Illinois 60201
Telephone 847 - 905 - 7111
Facsimile 847 - 905 - 7113

Date: JUNE 21, 2004

To: EXAMINER TAN Q. NGUYEN
U.S. PATENT AND TRADEMARK OFFICE

Fax #: (703) 872-9318

From: FRANK C. NICHOLAS
Phone #: (847) 424-2521

Client/Matter No.: GP-302957 (2750/30)

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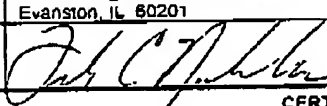
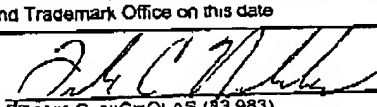
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	Application Number	10/601,467
	Filing Date	JUNE 23, 2003
	First Named Inventor	BRIAN A. WIMS
	Group Art Unit	2829
	Examiner	NGUYEN, TAN Q

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Response to Office Action Dated May 24, 2004 <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Status Letter <input type="checkbox"/> Petition for Extension of Time Request (dupl.) <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement, PTO-1449, art. <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application	<input type="checkbox"/> Assignment Papers (for an Application) <input checked="" type="checkbox"/> Drawings: FIG. 5 Replacement Sheet <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> To Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request of Refund	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Post Card Receipt <input type="checkbox"/> Additional Enclosure(s) (please identify below) <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
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Indep		Minus		0	x \$43	0		x \$86	
First Presentation of Multiple Dep. Claim					- \$145	-		+ \$290=	
					total add'l fee			total add'l fee	
					\$ 0			\$	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm or Individual name	FRANK C. NICHOLAS Registration No. 33,983 CARDINAL LAW GROUP 1603 Orrington Avenue, Suite 2000 Evanston, IL 60201		
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Attorney Docket No GP-302957 (2750/30)

Application Number 10/601,457

Filing Date JUNE 23, 2003

First Named Inventor BRIAN A. WIMS

Group Art Unit 2829

Examiner NGUYEN, TAN Q

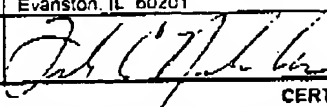
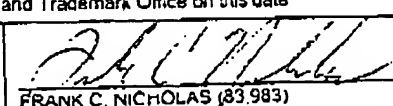
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<input type="checkbox"/> Alter Final	<input checked="" type="checkbox"/> Drawings FIG. 5 Replacement Sheet	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice Brief, Reply Brief)
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Alter Allowance Communication to Group	<input type="checkbox"/> Proprietary Information
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<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/>
<input type="checkbox"/> Information Disclosure Statement, PTO-1449, 3n	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/>
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Small Entity Statement	<input type="checkbox"/>
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	<input type="checkbox"/> Request of Refund	<input type="checkbox"/>
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First Presentation of Multiple Dep. Claim				+ \$145	---		+ \$290=	
				total add'l fee		\$ 0	total add'l fee	
							\$	

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